

DEBEL SPECIAL PART-TIME CLASS

P. O. BOX KS 17871, KUMASI-GHANA. TEL: 0500332277/0322499939



APPLICATION FORM-STUDY

ADMISSION FEE
GH¢

A3

INITIAL DEPOSIT
GH¢

Fix
Passport
Picture
here

SELECT YOUR PREFER PROGRAMME: ONE ON ONE

☐

COMBINE

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SECTION A: PERSONAL DETAILS

CLASS/FORM:

Full Name (Surname): Mobile:

Other Name(s):

Date of Birth: Gender: Male ☐ Female ☐

Where born
(District, City, Region):

Occupation: Nationality.....

for education background use only

Last Institution Attended:

Valid ID number (#): **ID Type:** **Expiry date:**

Residential Address:

Location/Landmark

Email Address:

Postal Address:

Religious Denomination: Christian ☐ Muslim ☐

Name of Religion: Location/Landmark:

ENTRY REQUIREMENTS/ELIGIBILITY

- ☐ Any applicant with or without formal or informal education background. **(Eligibility)**
- ☐ Photocopy of result slip/testimonial/terminal reports.
- ☐ 2-passport size photographs with white background.

- ☐ Completely filled out admission form.
- ☐ Full payment of admission fee.
- ☐ Any career applicant without any certificate should be 17 years and above.

NB: Any payment made is not refundable.

SECTION B: SUBJECTS PREFERENCE

Subject(s) to be studied:

List your weak/difficult subject(s):

1. 3.

2. 4.

SECTION C: FEES PREFERENCE/PAYMENT

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DAILY FEE GH¢

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WEEKLY FEE GH¢

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MONTHLY FEE GH¢

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TERMLY FEE GH¢

Attach a copy of your result slip, certificate, testimonial or terminal report. Study Duration:

SECTION D: PARENT/GUARDIAN DECLARATION

Name of Parent/Guardian:

Permanent Address: Tel/Mobile:

Occupation: Email:

I, accept the responsibility to pay fees and other expenses of my ward(s). I also adhere to the rules and regulations of the school and promised to co-operate with the school authorities on issue concerning my ward.

Signature: ID#: Date:

FOR OFFICE USE ONLY:

ADMISSION
CODE

ADM/STUDY
LOCATION

Management Remarks

Accepted

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Denied

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Name: Signature: Date: